

ASSISTANT COMMISSIONER FOR PATENTS
Washington, DC 20231

PATENT

File No.: 2203.65868

Date: September 26, 2001

Transmitted herewith for filing pursuant to 35 U.S.C. §111(a), is the
patent application of
Inventor(s): Daffunchio et al.

For: BIOLOGICAL CONTROL OF HORN FLIES

I hereby certify that this paper is being deposited
with the United States Postal Service as EXPRESS
MAIL in an envelope addressed to: Assistant
Commissioner for Patents, Washington, D.C.
20231, on September 26, 2001.
Express Label No.: EL846174910US

Signature: 

Enclosed are:

(X) 27 pages of specification, including 20 claims and an abstract.
() an executed oath or declaration, with power of attorney.
(X) an unexecuted oath or declaration, with power of attorney.
() ___ sheet(s) of informal drawing(s).
() ___ sheet(s) of formal drawings(s).
() Assignment(s) of the invention to _____ and Assignment Recordation Form.
() A check in the amount of \$_____ to cover the fee for recording the assignment(s) is enclosed.
() Supplemental Information Disclosure Statement; Form PTO-1449 and cited references.
() Claim for Priority and Priority Document
() PCT Request (Courtesy copy)

jc821 U.S. PRO
09/26/01


Fee Calculation For Claims As Filed

a) Basic Fee	\$ 710.00
b) Independent Claims	<u>3</u> - 3 = <u>0</u> x \$ 80.00 = \$ <u>- 0 -</u>
c) Total Claims	<u>20</u> - 20 = <u>0</u> x \$ 18.00 = \$ <u>- 0 -</u>
d) Fee for Multiple Claims	\$270.00 = \$ <u>- 0 -</u>
	Total Filing Fee \$ <u>710.00</u>

(X) Applicant qualifies for Status as Small Entity, reducing Filing Fee by half to \$ 355.00
() A check in the amount of \$_____ to cover the filing fee is enclosed.

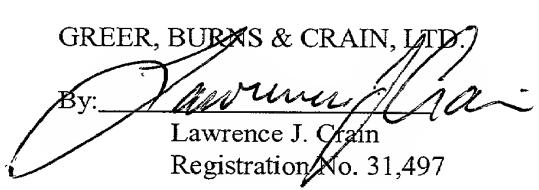
Preliminary Amendment

() Please insert the following between the title and line 1 of the specification: "This is a continuation
of ____".

(X) The Commissioner is hereby authorized to charge any additional fees which may be required to this
application under 37 C.F.R. §§1.16-1.17, or credit any overpayment, to Deposit Account No. 07-2069.
Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned,
post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized
to charge the unpaid amount to Deposit Account No. 07-2069. A duplicate copy of this sheet is
enclosed.

300 South Wacker Drive
Suite 2500
Chicago, Illinois 60606
(312) 360-0080
Customer Number: 24978

GREER, BURNS & CRAIN, LTD.

By: 

Lawrence J. Crain
Registration No. 31,497